



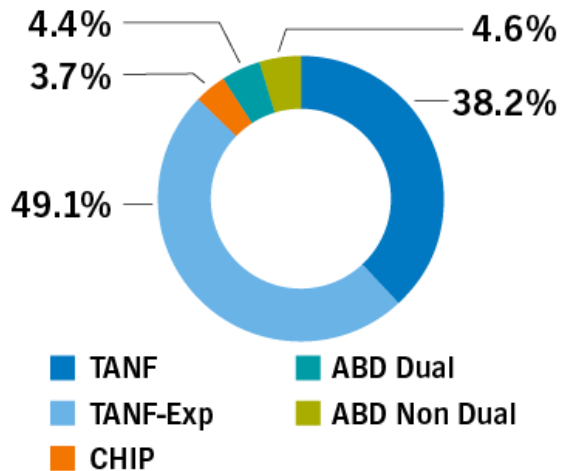
Medicaid Advisory Council

Anthem Report

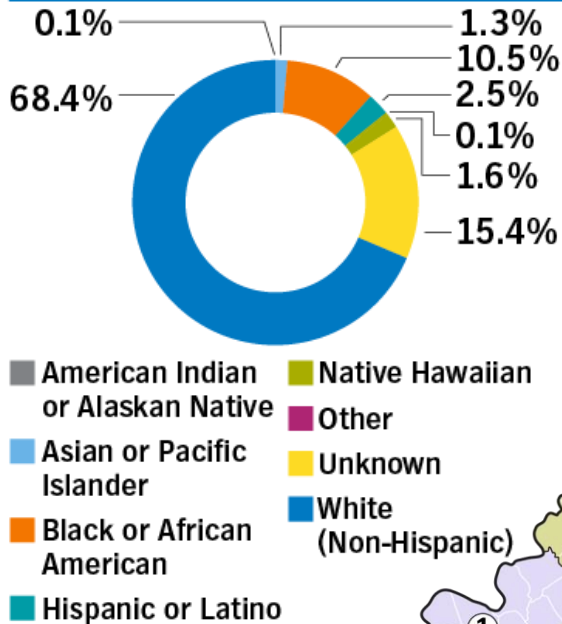
May 26, 2022

Addressing Diverse Health Needs Across the Commonwealth

By Product

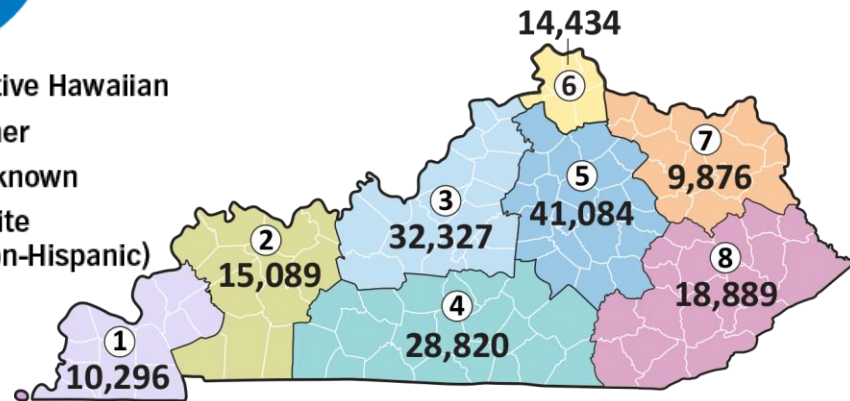


By Race/Ethnicity



170,815

Membership as of
March 1, 2022



MEDICAL CLAIMS

Average Claims
Turnaround Time

8.1 DAYS

Paid Claim
Count Total

1,501,141

Claims Paid

\$221,199,987

Encounters
Acceptance Rate

99.87%

Claims Processed
Within 30 Days

99.38%

CALL CENTER



Provider

Call Count
38,152Call Count
53,304

Member

13 Seconds
Average Speed to Answer10 Seconds
Average Speed to Answer

PHARMACY



650,182

Total Paid
Prescriptions YTD

TOP PRESCRIPTIONS UTILIZATION

Drug Category	Claims	Paid Dollars
Cardiovascular Disease - Hyperten.	98,873	\$1,767,007
BH - Antidepressants	85,721	\$2,797,542
Pain Management - Analgesics	63,387	\$5,559,985
Allergy	62,070	\$830,835
BH - Other	61,143	\$11,665,469
Inflammatory Disease	51,471	\$13,298,914
Diabetes	48,292	\$18,220,396
Infectious Disease - Bacterial	48,286	\$858,224
Asthma & COPD	47,326	\$8,882,940

QUALITY MEASURES

2020

2021

Adult Access to Preventive Care

76.3% / 79.7%

Breast Cancer Screening

47.8% / 49.0%

Cervical Cancer Screening

46.3% / 51.7%

Colorectal Screening

35.1% / 43.2%

Annual Dental Visit (Child Preventative)

35.4% / 40.3%

*ADMINISTRATIVE Rate MY2020 vs MY2021

TOP Z CODE BILLED SDOH NEEDS

Z598 - Other problems
related to housing and
economic circum.Z590
HomelessnessZ595
Extreme Poverty

CLINICAL UTILIZATION



Admits/1000

63 / 57



Days/1000

340 / 260



ER/1000

570 / 428



Telehealth/1000

1500 / 1970

2021

2022 YTD

ENROLLMENT

172,702

Members Assigned

Assignment

Auto-assigned Self-selected

78K 94K

0 172K

COMMUNITY
OUTREACH

YTD Meetings & Events

811

POPULATION HEALTH

2022 YTD Top 5 DX by
Claims Paid

Opioid Dependence	\$9,334,210
Other Stimulant Dependence	\$2,810,064
Alcohol Dependence	\$2,208,375
Generalized Anxiety Disorder	\$1,354,443
Contact W & Exposure to C-19	\$1,269,979

2022 YTD Top 5 DX by
Claim Counts

Opioid Dependence	112,392
Contact W & Exposure to C-19	18,972
Other Stimulant Dependence	15,524
Generalized Anxiety Disorder	15,514
Essential (Primary) Hypertension	15,240

Elevate | Elevating beyond Whole Health & Advancing beyond Healthcare



DRIVING HEALTH EQUITY









- Data focused
- Whole-person care
- Accountable, collaborative
- Multi-disciplinary
- Results oriented

Addressing Member Needs

Anthem Domain of Focus

-  Behavioral Health
-  Cancer Screenings and Treatment
-  COVID Testing and Vaccinations
-  Chronic Conditions
-  Dental Visits and Oral Health
-  Maternal / Child Health
-  Health Related Social Needs (SDoH)
-  Substance Use Disorder

Key Performance Metrics

-  Reduce Suicide Attempts & Increase BH Utilization for Anxiety & Depressive Disorders
-  Increase Colorectal & Lung Cancer Screening
-  Increase COVID Vaccination Rates
-  Decrease Diabetes & Hypertension Dx
-  Increase Annual Dental Visits
-  Increase Childhood Immunizations & Increase Prenatal Care
-  Decrease Food Insecurity & Homelessness
-  SUD-Reduce Overdose Rates in Kentucky

2022 Elevate | Population Health Solutions

COVID-19 Vaccine Provider and Member Incentives

PREVENTING THE SPREAD OF COVID-19



20,000 KN95 masks distributed to frontline workers and communities



20,000 hand sanitizers distributed to CBOs statewide



60 COVID-19 vaccine events held statewide (to date)



\$50 provider incentive for COVID-19 vaccinations and **\$100 member incentive** for COVID-19 vaccinations



Educating all 170,000 members on safety and effectiveness of COVID-19 vaccines



Working one-on-one with high-risk members to **schedule COVID-19 vaccine appointments** and transportation



10,000 vaccine cardholders distributed

Doula Pilot Program



Improving Health Outcomes Through Doulas

Doulas have been shown to improve birth outcomes, address disparities in maternal health care and mitigate health-related social needs.

Commitment to Rural Health



Filling the Gaps in Rural Health Care

Goal: Expanding the pipeline of health care professionals to areas that need them the most.

There is currently a **10-40% vacancy** rate of nursing positions across Kentucky hospitals with rates highest in rural areas.

The Anthem Rural Medicine Scholarships will provide:

- \$184,000 initial investment** for EKU and HCTC scholarships
- 7,500 Kentuckians** with better primary care access

Improving Oral Health Visits



BRIGHTER SMILES, BRIGHTER FUTURES

Goal: To equip and educate students on better oral health practices by providing them with free toothbrushes and proper brushing technique guides.

2,500 dental care kits delivered to students in six eastern Kentucky public schools

DENTAL DAYS

Goal: To offer quick and easy access to dental care by Kare Mobile Dentistry.

Services provided:

- Checkups
- Cleanings
- Quick Procedures
- Sonic Toothbrushes
- Floss
- Resources

AVAILABLE MEMBER INCENTIVES

Childhood dental visits (ages 2-20)
\$25/year

Adult dental visits (ages 21+)
\$25/year

Ample Access and Availability to Providers

Anthem significantly exceeds contract requirement of 95% for all key provider types

Provider Category	Accessibility Standard(s)	Unique Count of Providers	Percent of Members with Access	Average Distance to One Provider
General Hospital	1 Provider within 30 Miles	111	99.72%	6.9
Primary Care		5586	100.00%	2.45
Allergy	1 Provider within 30 Miles (Urban Members) or 1 Provider with 50 Miles (Rural Members)	75	97.76%	10.38
Cardiology		556	100.00%	5.15
Dental Services		745	99.99%	4.53
General Surgery		433	100.00%	5.39
Hematology / Oncology		378	100.00%	6.75
Neurology		394	100.00%	7.31
Obstetrics		716	100.00%	5.73
Orthopedics		428	100.00%	6.39
Otolaryngology		140	100.00%	7.28
Psychiatry		461	100.00%	3.84
Urology		168	100.00%	7.53
Vision Services		701	100.00%	4.46

Source: Access Dashboard, March 2022 – Based on NPI number and does NOT count multiple locations

Provider Access by the Numbers

Practitioner Group			Availability Standards	2019 Rate	2020 Rate	2021 Rate	+/- YOY	Goal Met?
Type	Practitioner	Geo						
Primary Care Practitioner	Family Practice/ General Practice	All	Ratio: PCP to members 1:1500	1:12	1:12	1:11	-1.00	Yes
		Urban	Geo: 1 provider within 30 miles	100.00%	100.00%	100.00%	0.00	Yes
		Rural	Geo: 1 provider within 30 miles	100.00%	100.00%	100.00%	0.00	Yes
	Internal Medicine	All	Ratio: PCP to members 1:1500	1:63	1:14	1:13	-1.00	Yes
		Urban	Geo: 1 provider within 30 miles	100.00%	100.00%	100.00%	0.00	Yes
		Rural	Geo: 1 provider within 30 miles	100.00%	100.00%	100.00%	0.00	Yes
	Pediatrician	All	Ratio: PCP to members 1:1500	1:19	1:40	1:39	-1.00	Yes
		Urban	Geo: 1 provider within 30 miles	100.00%	100.00%	100.00%	0.00	Yes
		Rural	Geo: 1 provider within 30 miles	99.99%	100.00%	99.50%	-0.5	Yes
High-Volume Specialist	OB/GYNs	All	Ratio: Specialist to members 1:1500	1:29	1:51	1:73	-22.00	Yes
		Urban	1 provider within 30 miles	100.00%	100.00%	99.90%	0.00	Yes
		Rural	1 provider within 50 miles	100.00%	100.00%	100.00%	0.00	Yes
High-Impact Specialist	Oncologist	All	Ratio: Specialist to members 1:2500	1:72	1:26	1:23	-3.00	Yes
		Urban	1 provider within 30 miles	100.00%	100.00%	100.00%	0.00	Yes
		Rural	1 provider within 50 miles	100.00%	100.00%	100.00%	0.00	Yes

*2021 YOY cannot be trended due to change in standards

Access for Adult PCP

92% Providers Accept New Patients

Unique Providers

3,422

Locations

2,610

Accepting New Patients

● Single Providers

■ Multiple Providers

Existing Patients Only

● Single Providers

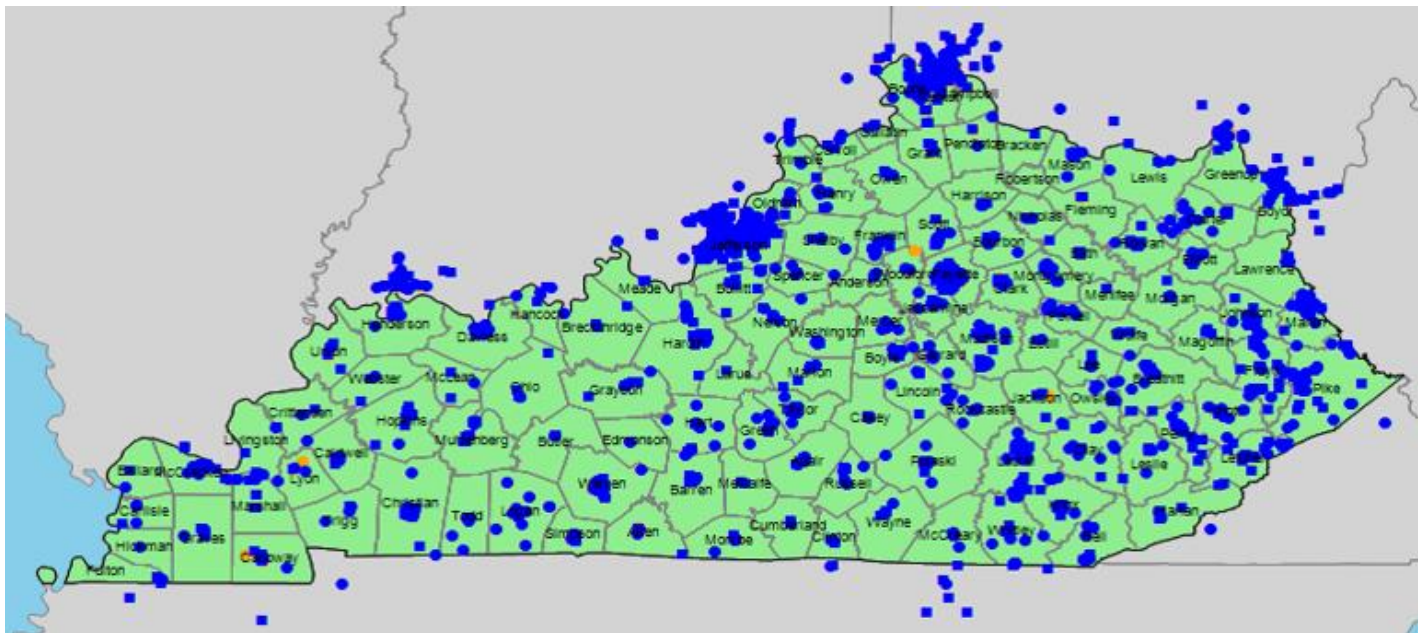
■ Multiple Providers

Keys

■ Between 95% and 100%

■ Between 0% and 94.99%

■ Default



Appointment Availability

Access percentage is very high and the biggest challenge is with BH Prescriber

Percentage of Providers passing contract requirements

(% does not include Return AH Calls)

Provider Type	2021Q1	2021Q2	2021Q3	2021Q4	2022Q1
PCP	99%	97%	96%	97%	96%
OBGYN	95%	85%	92%	100%	98%
Oncology	98%	97%	99%	100%	97%
Other Specialist	81%	80%	86%	91%	87%
BH Prescriber	79%	84%	83%	73%	75%
BH Non-Prescriber	90%	90%	89%	89%	86%
PED	100%	100%	100%	100%	98%

Source: Timely Access Report (PSN-09) 4/30/2022

Advancing Quality Care

66% of Anthem Members have a PCP who participates in a Value-based Payment Program



Wellness and Prevention

- Provider Incentive Program
- Provider Quality Incentive Program (PQIP)
- Pay for Quality (P4Q)
- HEDIS®
- PQIP Essentials



Behavioral Health & Substance Use Disorder

- BH Quality Incentive Program (BHQIP)
- BH Facility Incentive Program (BHFIP)



Chronic Disease Management & Priority Conditions

- Integrated Care Quality Incentive Program (ICQIP)
- Pediatric Residential Treatment Quality Incentive Program (PRTQIP)



Focus on Special Populations

- OB Quality Incentive Program (OBQIP)
- SDOH Provider Incentive Program (SDOHPIP)

HEDIS Overview



Performance insights and analytics of quality measure performance, barriers and mitigation strategies
For MY2018 through MY2021* (Reporting Years 2019 – 2022)

Major Findings

- Overall, the best performing quality domain is Maternal Infant Child
- Biggest improvement in rates were seen in Maternal Infant Child domain followed by Chronic Conditions domain
- Majority of the quality measures have trended upwards from MY2018 - MY2021*
- Covid-19 Impact affected final reporting and use of services for MY2019- MY2021*
- Increase in use of Telehealth services helped to boost performance in applicable measures, mainly BH
- Performance in substance abuse related BH measures varies
 - FUA and HDO/UOD have trended upwards from MY2018 - MY2020
 - FUI has trended downward from MY2019 - MY2021*
 - POD increased MY2019-MY2020 with a decrease in MY2021*
 - IET increased from MY2018-MY2019 and steadily decreased from MY2019-MY2021*

Recommendations

- Access to supplemental data and EMR has a big impact to Quality measures performance
- Address members SDOH needs to improve utilization
- Continue with Member and Provider education, incentives and care coordination

*MY2021 HEDIS rates are preliminary as of April '22 Run. 2022 HEDIS project in progress



**NCQA Health Insurance Plan Rating:
Anthem Kentucky Managed Care Plan, Inc.**

Measurement Year	Star Rating	Consumer Satisfaction
2019/2020	3.5	4.5
2018	3.5	3

Healthy Rewards: Increased Incentives

Examples reflect incentives tailored to a variety of member needs

Pregnant or New Mother

Incentive Value Up to \$375

- Annual Health Screener - \$25
- Adult Well Visit - \$25
- 1st Prenatal Care Visit - \$25
- Postpartum Visit - \$50
- W30 Well Child (0-30 Month) Visit - \$25
- Flu Shot - \$25
- COVID-19 Vaccine - \$100
- Tobacco Cessation - \$75 (If mother smokes)
- New - Adult Dental Incentive (Pending July 2022) - \$25

Member with Diabetes

Incentive Value Up to \$290

- Annual Health Screener - \$25
- Adult Well Visit - \$25
- A1c Screening - \$25
- Diabetic Medication Mgmt. (Quarterly x \$10) – Up to \$40
- Diabetic Retinal Eye Exam - \$25
- Flu Shot - \$25
- COVID-19 Vaccine - \$100
- New - Adult Dental Incentive (Pending July 2022) - \$25

45-50 Yr.-old Male with Hypertension

Incentive Value Up to \$290

- Annual Health Screener – \$25
- Adult Well Visit - \$25
- Colorectal Cancer Screening - \$50
- Flu Shot - \$25
- COVID-19 Vaccine - \$100
- New - BP Medication Refill Mgmt. (Pending July 2022) Up to \$40
- New - Adult Dental Incentive (Pending July 2022) - \$25

Enhanced Value-added Benefits



Maternal and Child Health

- 200 Mail Order Diapers
- Breastfeeding Support Kit
- Portable crib or car seat
- Books for Babies
- Safe Sleep Kit
- Stroller Organizer
- Boys and Girls Club Membership



Education and Employment Supports

- \$200 in gas cards per year or quarterly bus passes
- No-Cost Laptop Benefit
- GED Assistance
- Criminal Record Expungement
- Lifeline Phone benefit
- Community Resource Link



Promoting Healthy Lifestyle

- Fresh Fruit and Veggies Program
- Home-Delivered Medically Tailored Meals
- WW® (formerly known as Weight Watchers®) Memberships
- Fitness Coach Program
- Healthy Families Program



Wellness

- Enhanced Mail Order OTC Products
- Sports and School Physicals
- Adult Vision Benefit
- Smoking Distraction Kit
- Healthy Lifestyle Aids
- Family Activity Coupon Book
- Caregiver Toolkit



Opioid Supports

- Medicine Safety Kit
- SUD Recovery Support Program – CHES Health App
- Online Well-being Program – Learn to Live

Increasing Engagement for Better Health

Digital Solutions to Aid Rural Access

- LARK Diabetes Prevention
- CHES Health App (SUD)
- Motivo BH Telehealth
- Learn to Live (mental health)
- LiveHealth Online (access to doctors)
- Anthem Sydney App (resources and tools)
- Community Resource Line (access to local CBOs)

LARK Successes

78% of members are active 4 months into the program

34% of members reported greater than 5% weight loss in month 5

94% maintained or lost weight

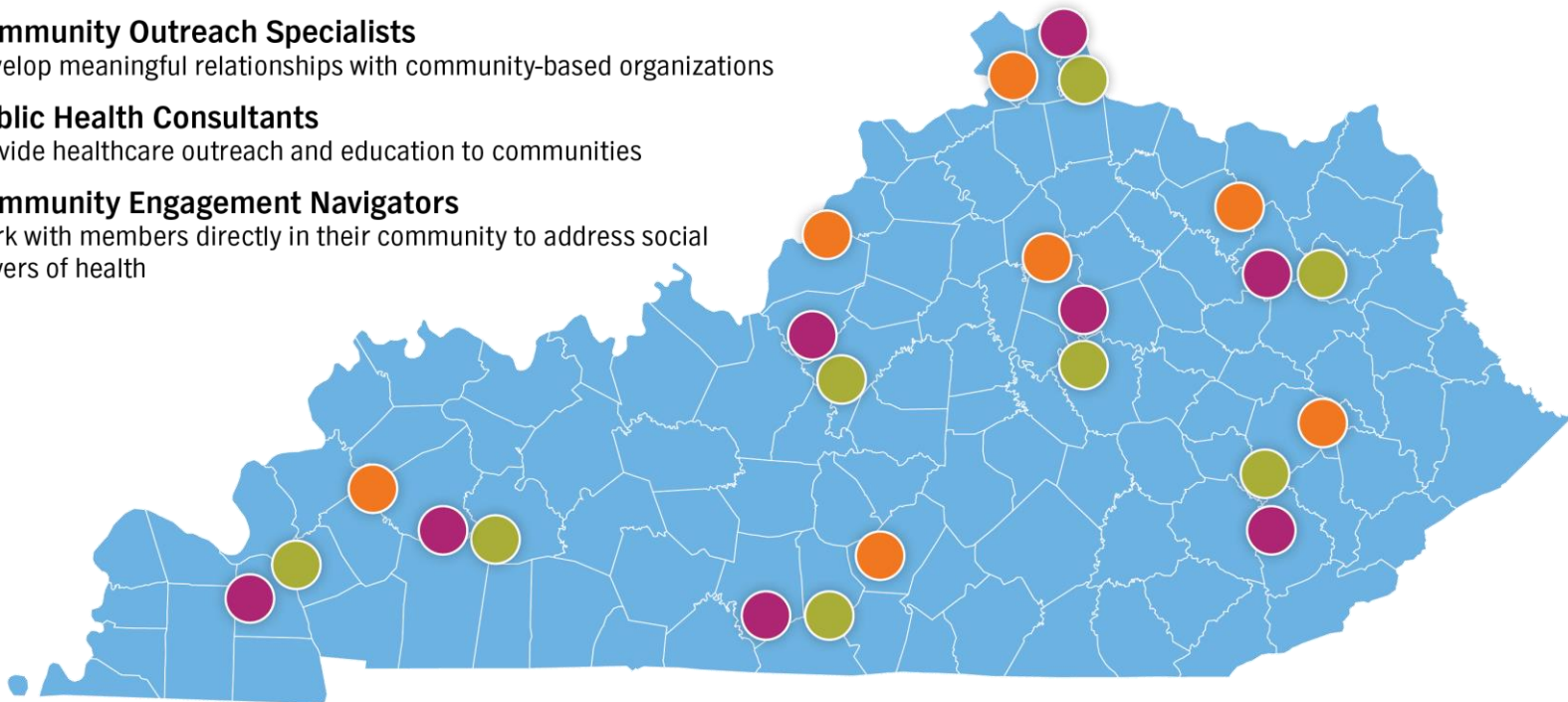


Doula Program Pilot Early Outcomes:

19 Doulas trained
0% Pre-term birth
0% Low birth weight
83% Breastfeeding

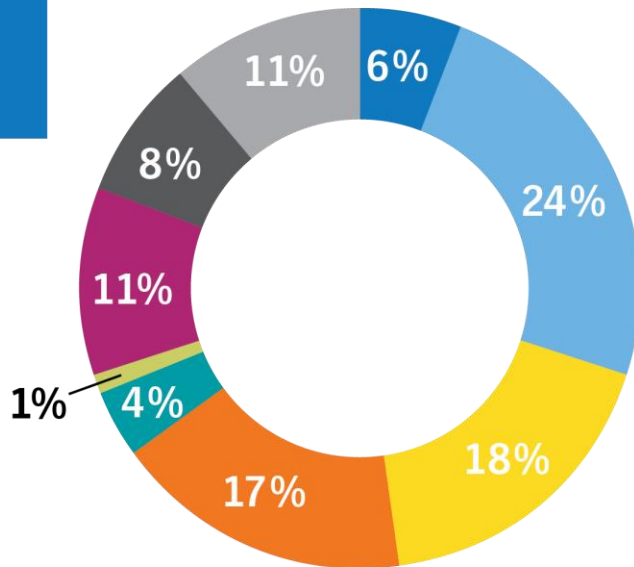
Field-based Staff Focused on Whole Person Needs

-  **Community Outreach Specialists**
Develop meaningful relationships with community-based organizations
-  **Public Health Consultants**
Provide healthcare outreach and education to communities
-  **Community Engagement Navigators**
Work with members directly in their community to address social drivers of health



Empowerment Program: Addressing Health Related Social Needs

2021 SDOH Referral Breakdown



Member Empowerment Program Services



Food



Education



Transportation



Employment



Housing

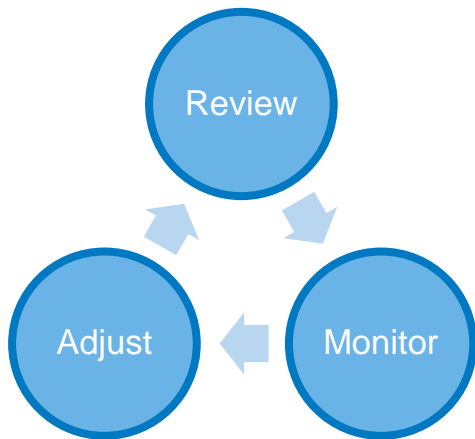


Criminal record expungement

Prior Authorizations

Anthem continues to simplify & streamline the PA process to reduce the administrative burden on providers & their staff

PA Evaluation



Easing Administrative Burden

- In 2019, removed 82 codes from PA
- Removed Targeted Case Management (TCM) for BH from PA

PA Denials and Education

Medical Necessity Criteria Not Met accounts for **88%** of all denials

Interactive Care Reviewer (ICR) tool in Availability:

- Offers streamlined way to request PAs
- Allows detailed text, photo images, and attachments
- Can be used to make inquiries
- Is available 24/7

Primary Expenditures

2019			2020			2021*		
CODE	DIAGNOSIS	RANKING	CODE	DIAGNOSIS	RANKING	CODE	DIAGNOSIS	RANKING
F1120	Opioid dependence, uncomplicated	1	F1120	Opioid dependence, uncomplicated	1	F1120	Opioid dependence, uncomplicated	1
R079	Chest pain, unspecified	2	F1520	Other stimulant dependence, uncomplicated	2	F1520	Other stimulant dependence, uncomplicated	2
M545	Low back pain	3	F1020	Alcohol dependence, uncomplicated	3	F1020	Alcohol dependence, uncomplicated	3
Z00129	Encounter for routine child health examination without abnormal findings	4	F411	Generalized anxiety disorder	4	F411	Generalized anxiety disorder	4
Z79891	Long term (current) use of opiate analgesic	5	F331	Major depressive disorder, recurrent, moderate	5	F840	Autistic disorder	5
J069	Acute upper respiratory infection, unspecified	6	F4310	Post-traumatic stress disorder, unspecified	6	Z20822	Contact with and (suspected) exposure to COVID-19	6
I10	Essential (primary) hypertension	7	Z00129	Encounter for routine child health examination without abnormal findings	7	F4310	Post-traumatic stress disorder, unspecified	7
Z23	Encounter for immunization	8	F840	Autistic disorder	8	F331	Major depressive disorder, recurrent, moderate	8
F411	Generalized anxiety disorder	9	Z23	Encounter for immunization	9	Z00129	Encounter for routine child health examination without abnormal findings	9
J029	Acute pharyngitis, unspecified	10	Z79899	Other long term (current) drug therapy	10	Z23	Encounter for immunization	10

*paid through February 2022

Pharmacy Trend

DMS increased funding to plans for second half of 2021 in response to the increase in Pharmacy costs driven by the single PDL and PBM. Pharmacy costs have continued to rise in 2022. Costs for drugs have increased \$58.1M or 24% on a PMPM basis since MedImpact took over on 7/1/2021.



*Actual data includes MCO Rebates

Decrease in ER Visits

1. The pandemic was the most likely cause of lower emergency room usage for Behavioral Health and Physical Health in 2020.
2. Skilled staffing and bed shortages contributed to the higher decline for Behavioral Health vs. Physical Health in 2021.

Emergency Room Usage	Year of Service			% Change	% Change
	2019	2020	2021	2020 vs. 2019	2021 vs. 2020
Emergency Room Visits Per 1000					
Physical Health	690.7	519.7	509.7	-26.2%	-1.9%
Behavioral Health	25.6	22.4	19.8	-22.6%	-11.4%
Total Emergency Room Visits Per 1000	716.3	542.1	529.6	-26.1%	-2.3%

*Paid through February 2022



Hospitalization Decreases

1. Inpatient Admits dropped significantly in 2020 due to the pandemic. The decline has leveled off, but hospitalizations have yet to return to pre-pandemic levels.
2. The higher decline for Behavioral Health vs. Physical Health in 2021 is due the pandemic, staffing shortages, fewer discharges and longer length of stays due to the PA waiver impacting the continuum of care.

Hospitalization Rates	Year of Service			% Change	% Change
	2019	2020	2021	2020 vs. 2019	2021 vs. 2020
Admits Per 1000					
Physical Health	118.6	105.6	100.4	-15.3%	-5.0%
Behavioral Health	29.7	27.8	23.1	-22.4%	-17.2%
Total Admits Per 1000	148.3	133.5	123.4	-16.8%	-7.5%

*Paid through February 2022



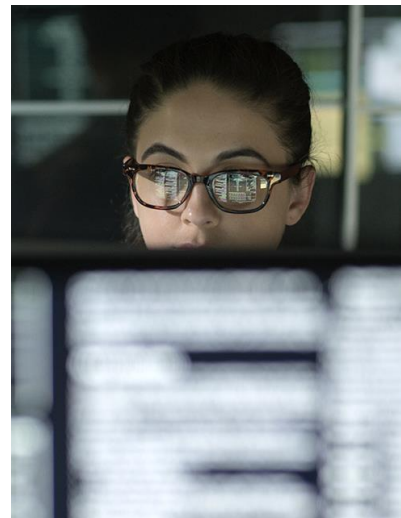
Readmission Rates

1. The Pandemic led to more emergent mix of admissions, which led to more readmissions.
2. Readmits per 1000 declined due to pandemic related capacity constraints and the Prior Authorization (PA) waiver. The PA waiver has led to a breakdown in the continuity of care, which has contributed to fewer admissions, discharges and therefore fewer members receiving treatment overall.

Readmissions Rates*	Year of Service			% Change	% Change	
	2019	2020	2021	2020 vs. 2019	2021 vs. 2020	
30 Day Readmissions Rate	3.85%	3.91%	4.16%	8.1%	6.5%	1
30 Day Readmissions per 1000	5.7	5.2	5.0	-12.7%	-4.3%	2

*Readmission rates within 30 days for the same condition

**Paid through February 2022



Claims Denial Rates

1. Three of the top ten denial reasons are related to coordination-of-benefits (COB) with a primary carrier.
2. Other top reasons include services not covered and duplicate claims.

	2019	2020	2021
Denial Rate	15.8%	16.9%	14.9%



Top Ten Denial Reasons	2019	2020	2021
COB: primary payment greater than allowable	92,482	103,433	133,328
Procedure non-reimbursable	57,729	64,898	70,469
Definite duplicate claim	72,034	64,918	52,856
Deny preauth not obtained	58,034	35,928	69,572
Billing NPI not registered with state	82,199	45,410	31,126
Incidental to a current procedure	43,101	40,607	48,608
COB: EOB required from primary carrier	1,917	44,777	59,016
Member not eligible	39,729	29,453	18,125
Charges processed under original submission	25,588	29,945	18,608
COB: primary carrier info req	41,705	13,694	13,707

Audits: Making Record Requests Less Burdensome

In 2021 we added an enhanced medical claim attachment capability through the Availity platform.

- Allows for electronic submission of claims and their associated medical records
- Categories of documents accepted include:
 - Discharge summaries
 - EDI 275 Electronic Attachments Transactions
 - Medical records for unsolicited and solicited requests
 - Payment Integrity Medical Records Requests

Health information exchanges, like KHIE, will lessen administrative burden

Record Requests	2019	2020	2021
Physical Health	4	6	6
Behavioral Health	16	23	12



COVID-19 Vaccination Progress



80 Anthem associates volunteered more than 320 hours at the LouVax clinic on April 6, 2022 helping to administer nearly 2,000 COVID-19 vaccines.

% of Eligible
Membership
Vaccinated

44.73%

Total Injections

112,820

Member Counts

Full Vax **48,680**

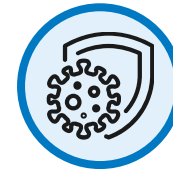
Partial Vax **7,017**

55,694

Members
Boosted

13,297

*as of March 1, 2022



Anthem was first in market to
launch a provider incentive for COVID-19 vaccine

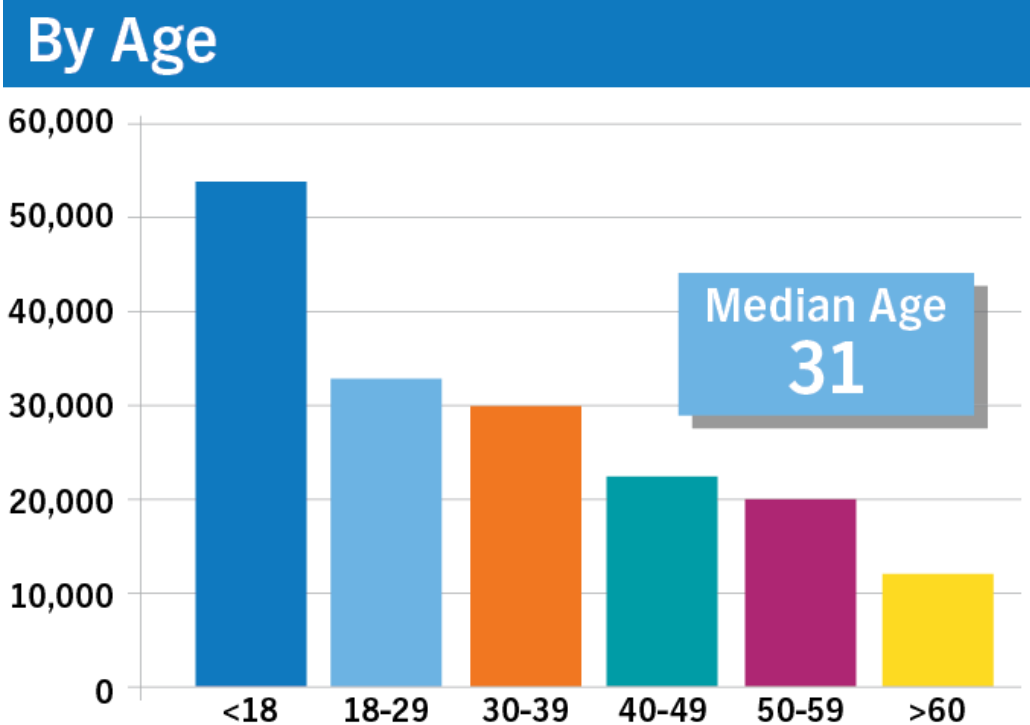
Thank you



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Appendix

Number of members by region and county and age groups as of March 1, 2022



For county membership, please
see document:
“Anthem KY Mbrship County
030122”



Participating providers in each region as of March 1, 2022, broken down by county

For region and county membership, please see document: “Anthem KY Providers Region-County 030122”



Appointment availability by county for both physical and behavioral health as of March 1, 2022

For appointment availability, please see documents:

“Anthem KY Appt Avail County 030122”

“Anthem KY After Hours County 030122”



Services offered to participants by each MCO to address physical and social determinants of health as of March 1, 2022

Physical Services

Healthy Rewards	24-hour NurseLine
Doula Program Pilot	Low-Intensity ER Avoidance Program
LARK Diabetes Prevention Program	Bluegrass Transitional Care Readmission Program
New Baby, New Life Program	Cancer Navigation Program
Diabetes Education Pilot with DPH and FQHCs	Sydney App
UK Research (CHET) Studies	LiveHealth Online
Smoking Cessation Tool (EX)	COVID-19 Vaccine Incentive

SDOH Services

Community Resource Link
Member Empowerment Program
Flex Fund Program



HEDIS measures and percent achievement for 2019, 2020 and 2021

Performance Summary

HEDIS Average Rating by Domain from MY2018- MY2021							
Domain	Overall Avg	MY2018 Avg	MY2019 Avg	MY2020 Avg	MY2021 Avg*	Difference 2018/2021	Difference 2020/2021
Adult Preventive	58.27%	58.68%	59.25%	56.50%	58.55%	-0.13%	2.05%
Behavioral Health	45.85%	44.82%	46.47%	45.87%	46.25%	1.43%	0.38%
Child Preventive	60.08%	62.59%	62.58%	57.30%	57.86%	-4.73%	0.56%
Chronic Conditions	60.26%	58.66%	60.79%	60.24%	61.30%	2.64%	1.06%
Maternal Infant Child	64.10%	60.59%	64.49%	67.58%	63.65%	3.06%	-3.93%

Green- Highest average rate across measurement years

Pink- Lowest average rate across measurement years

**As of April, 2022 interim HEDIS data run*

HEDIS MY2021 Disparity Analysis by Race/Ethnicity

Measure	Segment with Highest Performance	Highest Performance %	Segment with Lowest Performance	Lowest Performance %	Overall Rate
AAP	White (Non-Hispanic)	81.55%	Native Hawaiian	61.11%	79.72%
BCS	Other Race	63.33%	White (Non-Hispanic)	48.22%	49.13%
CCS	Hispanic	63.71%	White (Non-Hispanic)	51.45%	51.79%
CDC_PoorHb	Black	23.46%	White (Non-Hispanic)	31.22%	30.23%
CIS 10	Asian or Pacific Islander	58.33%	Black	21.41%	26.13%

*Data as of Dec 31, 2021 (April Run1)

•Overall, minority populations performed better.

•In the Child Domain, Asian/pacific Islander population performed better

HEDIS measures and percent achievement for 2019, 2020 and 2021

Quality Measures Performance Summary

Domain	Measures Included	Summary Findings	Domain Performance Trend 2018 - 2021	Barriers	Populations with Highest Disparity	Mitigation
Adult Preventive	BCS, CCS, CHL, AAP	Average performance : 58.27% Strength: BCS, CCS and AAP measures are demonstrating rate increases for MY2021* compared to MY2020. Rate increases include 1.15% for BCS, 4.38% for CCS and 3.43% for AAP Opportunity: BCS, CCS, AAP and CHL all initially declined in rates from MY2019 to MY2020	Slight Decline	Covid-19 impact, Access to medical record data, SDOH	Black/African American	Supplemental data, Access to EMR, member education, care coordination, comprehensive population review/analysis, provider level insights
Child Preventive	WCC, IMA, URI, ADV, CWP	Average performance: 57.06% Strength: 4 of the 7 measures/sub-measures in the Child Preventive Domain seem favorable for MY2021* compared to MY2020 rates. Opportunity: Comparing MY2018 to MY2021*, 6 of the 7 measures in the Child Preventive Domain decreased with WCC-BMI with the most significant decrease	Slight Decline	Covid-19 impact, Access to medical record data, SDOH	White Non-Hispanic	Coordination Of Care Supplemental data
Maternal Infant Child	CIS, LSC, PPC	Average performance: 63.65% Strength: From MY2018 to MY2019, all measures/sub-measures in the Maternal Infant Child Domain either remained steady or increased. 3 of the 4 measures increased in rates from MY2019 to MY2020	Significant Improvement	Covid-19 impact, Access to medical record data, SDOH	White/ Non-Hispanic	Coordination Of Care
Behavior Health	ADD, AMM, FUH, FUM, FUI, FUA, SSD, SMC, SMD, POD, APM, SAA, IET, APP, HDO/UOD	Average Performance : 45.85% Strength: Half of the measures/sub-measures in the Behavioral Health Domain increased from MY2020 to MY2021* with the biggest increase of 9.00% percentage points occurring in the AMM- Acute measure Opportunity: ADD-Continuation and FUI are the only measures with a steady decrease from MY2018 to MY2021*	Significant Improvement	Covid-19 impact, Access to medical record data, SDOH	Black/African American	Telehealth comprehensive population review/analysis, Coordination of Care
Chronic Conditions	SPR, PCE, AMR, CBP, PBH, SPC, SPD, CDC, AAB, LBP	Average performance: 61.30% Strength: 13 of the 17 measures/sub-measures that comprise the Chronic Condition Domain demonstrate favorable rates for MY2021* when compared to MY2020.	Significant Improvement	Covid-19 impact, Access to medical record data, SDOH	White/ Non-Hispanic	Coordination Of Care Supplemental data

Supplemental data and EMR access remains an area of opportunity to increase HEDIS rates across all Domains. Domains that can particularly benefit the most include the Adult Preventive, Behavioral Health and Chronic Conditions.

- In MY2020, measures/sub-measures in the Chronic Condition Domain where additional supplemental data collection could have been beneficial in reaching the next percentile along with the number of hits needed include: CDC A1c Test-8, CDC Eye-34, CDC Neph-5, CDC <8- 8, CBP-10 and SPR-5.
- MY2021* HEDIS rates are preliminary as of April'22 Run. 2022 HEDIS project in progress

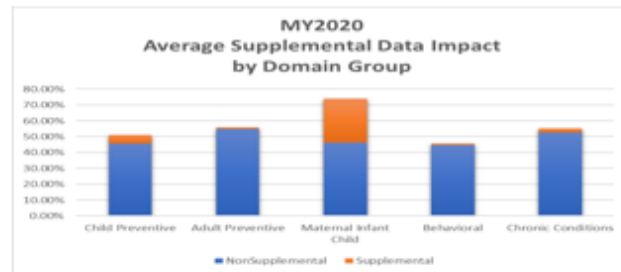
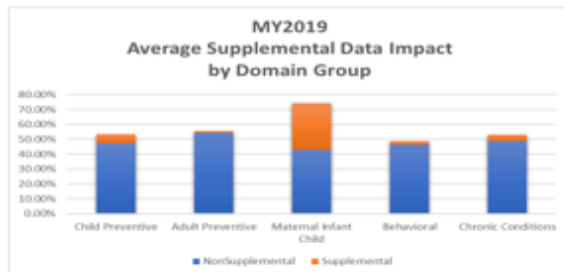
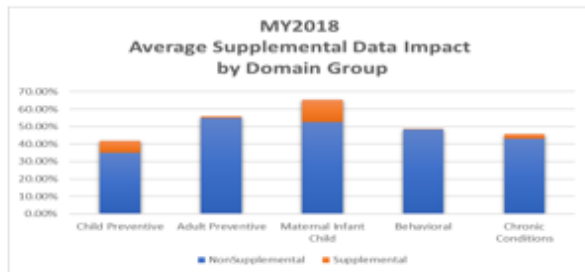
HEDIS measures and percent achievement for 2019, 2020 and 2021

Supplemental Data Analysis

Supplemental Data Analysis

Supplementa Data Collection	Child Preventive				Adult Preventive				Maternal Infant Child			Chronic Conditions		Behavioral Health									
Measurement Year	ADV	IMA	WCC	CWP	AAP	BCS	CCS	CHL	CIS	LSC	PPC	CBP	CDC	ADD	FUA	FUM	FUH	FUI	POD	SAA	SSD	APM	SMD
MY2018	X	X	X		X	X	X	X	X	X	X	X	X	X		X	X						
MY2019	X	X	X	X	X	X	X	X	X	X	X	X	X		X	X	X	X	X	X	X		
MY2020	X	X	X	X	X	X	X	X	X	X	X	X	X		X		X	X	X		X	X	X

X- Measures that increased rate due to supplemental data



HEDIS measures and percent achievement for 2019, 2020 and 2021

Abbreviations

Measure Abbreviation	Measure Name
BCS	Breast Cancer Screening
CCS	Cervical Cancer Screening
CHL	Chlamydia Screening in Women
AAP	Adults' Access to Preventive/Ambulatory Health Services
FUH	Follow-Up After Hospitalization for Mental Illness
FUM	Follow-Up After Emergency Department Visit for Mental Illness
FUI	Follow-Up After High-Intensity Care for Substance Use Disorder
FUA	Follow-Up After Emergency Department Visit for Alcohol and Other Drug Dependence
SSD	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications
SMC	Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia
SMD	Diabetes Monitoring for People With Diabetes and Schizophrenia
POD	Pharmacotherapy for Opioid Use Disorder
APM	Metabolic Monitoring for Children and Adolescents on Antipsychotics
SAA	Adherence to Antipsychotic Medications for Individuals With Schizophrenia
ADD	Follow-Up Care for Children Prescribed ADHD Medication
AMM	Antidepressant Medication Management
APP	Use of First-Line Psychosocial Care for Children & Adolescents on Antipsychotics
IET	Initiation & Engagement of Alcohol & Other Drug Dependence Treatment

Measure Abbreviation	Measure Name
HDO/UOD	Use of Opioids at High Dosage
SPR	Use of Spirometry Testing in the Assessment and Diagnosis of COPD
PCE	Pharmacotherapy Management of COPD Exacerbation
CBP	Controlling High Blood Pressure
PBH	Persistence of Beta-Blocker Treatment After a Heart Attack
SPC	Statin Therapy for Patients With Cardiovascular Disease
SPD	Statin Therapy for Patients With Diabetes
CDC	Comprehensive Diabetes Care
AAB	Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis
LBP	Use of Imaging Studies for Low Back Pain
CIS	Childhood Immunization Status
LSC	Lead Screening in Children
PPC	Prenatal and Postpartum Care
ADV	Annual Dental Visit
CWP	Appropriate Testing for Children With Pharyngitis
IMA	Immunizations for Adolescents
URI	Appropriate Testing for Children With Upper Respiratory Infection
WCC	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents

Number of audit requests by month for calendar years 2019, 2020 and 2021 for behavioral health and for physical health

2019	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec	Total
Physical Health				3		1							4
Behavioral Health		1		4		8			2			1	16

2020	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec	Total
Physical Health					1	1	1		1		1	1	6
Behavioral Health	2		2	2	4	3	4	1	1	1	1	2	23

2021	Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec	Total
Physical Health		2		1		1		1				1	6
Behavioral Health		1			1	1		2	1		4	2	12

Report on procedures requiring prior authorization; top 10 reasons for denials for Calendar Years 2019, 2020 and 2021; how does the MCO select the procedures that require pre-authorization

Medical Necessity Criteria not being met is the #1 reason for denied prior authorizations, accounting for 88% of all denials.

Denial Reason: Sub-Reason	2019 Denials Total	2020 Denials Total	2021 Denials Total
Medical Necessity: Criteria Not Met	4840	3573	4554
Medical Necessity: Delay in Discharge	0	0	0
Medical Necessity: Continuity of Care	NA	NA	NA
Medical Necessity: Level of Care	413	46	40
Benefits & Eligibility: Benefit not covered	18	11	17
Benefits & Eligibility: Out of Network	0	0	0
Benefits & Eligibility: Benefit Limit Reached	0	0	0
Benefits & Eligibility	0	0	2
Provider: Out of Network	115	24	48
Provider: Late Notification	500	132	350
Total	5886	3786	5011

For procedure report, please see document: “Anthem KY PA Report”

For PA determination, please see document: “Anthem KY PA Determination”

ER usage comparing 2019, 2020, 2021 for both physical and behavioral health; actual numbers

BH ER Usage	Visits per 1000	Cost per Visit
OP ER		
2019	25.6	\$314
2020	22.4	\$332
2021	19.8	\$347
Grand Total	22.4	\$330

PH ER Usage	Visits per 1000	Cost per Visit
OP ER		
2019	690.7	\$578
2020	519.7	\$627
2021	509.7	\$650
Grand Total	567.4	\$617

TOTAL Usage	Visits per 1000	Cost per Visit
OP ER		
2019	716.3	\$568
2020	542.1	\$615
2021	529.6	\$639
Grand Total	589.8	\$606

Hospitalization rates comparing 2019, 2020, and 2021 for both physical and behavioral health; admission numbers

IP BH	Admits per 1000	Cost per Admit	IP Physical Health	Admits per 1000	Cost per Admit	Total	Admits per 1000	Cost per Admit
2019	29.7	\$6,480	2019	118.6	\$8,984	2019	148.3	\$8,482
2020	27.8	\$7,688	2020	105.6	\$9,294	2020	133.5	\$8,959
2021	23.1	\$7,946	2021	100.4	\$9,769	2021	123.4	\$9,428

Readmission rates within 30 days for the same condition for calendar years 2019, 2020 and 2021

Clinically similar 30 Day readmit to any facility	2019	2020	2021
Readmit per 1000	5.7	5.2	5.0
Cost per Readmit	\$8,162	\$10,152	\$9,718